

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Human Rights Campaign PAC

ADDRESS (number and street) ▼

1640 Rhode Island Ave NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00235853

3. IS THIS
REPORT☐ NEW
(N)

OR

☒ AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☒ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2016

through

M M M / D D D / Y Y Y Y Y Y
01 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. James M. Rinefield

Signature of Treasurer

Mr. James M. Rinefield

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
02 19 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Human Rights Campaign PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
01 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		530237.34
(b) Cash on Hand at Beginning of Reporting Period.....	530237.34	
(c) Total Receipts (from Line 19)	64006.34	64006.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	594243.68	594243.68
7. Total Disbursements (from Line 31)	138738.89	138738.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	455504.79	455504.79
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Human Rights Campaign PAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y
01	/	01	/	2016

To:

M M M	/	D D D	/	Y Y Y Y Y
01	/	31	/	2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

7658.34

7658.34

(ii) Unitemized

56348.00

56348.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

64006.34

64006.34

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

64006.34

64006.34

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

64006.34

64006.34

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

64006.34

64006.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	13666.69	13666.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13666.69	13666.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12636.27	12636.27
24. Independent Expenditures (use Schedule E)	110935.93	110935.93
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	1500.00	1500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	138738.89	138738.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	138738.89	138738.89

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	64006.34	64006.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	64006.34	64006.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	13666.69	13666.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	13666.69	13666.69

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: F3XA
Transaction ID :

Updated expense and state allocation for vendor API after receiving a final invoice. See update in schedule E for entries dated 1/28/2016.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

Full Name (Last, First, Middle Initial)

A. Rhonda L. Berchuck

Mailing Address 320 Wayland Ave Apt 3

City

Providence

State

RI

Zip Code

02906-4537

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fidelity Investments

Occupation

Vice President, Creative Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 20 / 2016

Transaction ID : C9518096

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Yve-Alain Bois

Mailing Address 1 Einstein Drive

City

Princeton

State

NJ

Zip Code

08540-4952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Professor

Occupation

Institute for Advanced Studies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

01 / 20 / 2016

Transaction ID : C9518107

Amount of Each Receipt this Period

235.00

Full Name (Last, First, Middle Initial)

C. Will Brewer

Mailing Address PO Box 128408

City

Nashville

State

TN

Zip Code

37212-8408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

01 / 15 / 2016

Transaction ID : C9518117

Amount of Each Receipt this Period

1200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1735.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 27
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

Full Name (Last, First, Middle Initial)

A. Stuart A. Friedman

Mailing Address 13610 Shaker Blvd Apt 401

City	State	Zip Code
Cleveland	OH	44120-1551

FEC ID number of contributing
federal political committee.

C

Name of Employer

State of Ohio

Occupation

Judge

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2016

Transaction ID : C9518206

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Brenda J Hafner

Mailing Address 15600 Dempsey Road

City	State	Zip Code
Leavenworth	KS	66048

FEC ID number of contributing
federal political committee.

C

Name of Employer

self employed

Occupation

consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2016

Transaction ID : C9518242

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Jason Holmes Laney

Mailing Address 1414 V St NW Apt 201

City	State	Zip Code
Washington	DC	20009-5857

FEC ID number of contributing
federal political committee.

C

Name of Employer

SMYAL

Occupation

Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2016

Transaction ID : C9518464

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

2008.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

Full Name (Last, First, Middle Initial)

A. Brad A Myers

Mailing Address 4528 Olentangy Blvd

City	State	Zip Code
Columbus	OH	43214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ohio State UniversityOccupation
University Registrar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		20		2016

Transaction ID : C9518240

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. John Reed Payne

Mailing Address Unit 3440 Box 493

City	State	Zip Code
DPO	AA	34020

FEC ID number of contributing
federal political committee.

C

Name of Employer
United States Department of StateOccupation
Foreign Service Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		20		2016

Transaction ID : C9518472

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. J. Christopher Pilley

Mailing Address 3111 Saint Claude Ave

City	State	Zip Code
New Orleans	LA	70117-6642

FEC ID number of contributing
federal political committee.

C

Name of Employer
Community & Residential Services AssocOccupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		20		2016

Transaction ID : C9518491

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

900.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

Full Name (Last, First, Middle Initial)

A. John R Rhodes

Mailing Address 1750 Taylor St
803

City State Zip Code
San Francisco CA 94133

FEC ID number of contributing
federal political committee.

C

Name of Employer

RPX Corp

Occupation

Consultant/General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 20 / 2016

Transaction ID : C9518340

Amount of Each Receipt this Period

235.00

Full Name (Last, First, Middle Initial)

B. David Rooks

Mailing Address 112 Hallmark Court

City State Zip Code
Lake Mary FL 32746-3601

FEC ID number of contributing
federal political committee.

C

Name of Employer

HSA Inc.

Occupation

None Profit Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 20 / 2016

Transaction ID : C9518308

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. David Schutte

Mailing Address 37 W 12th St Apt 7K

City State Zip Code
New York NY 10011-8544

FEC ID number of contributing
federal political committee.

C

Name of Employer

Knoll Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 13 / 2016

Transaction ID : C9518521

Amount of Each Receipt this Period

1200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1660.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

Full Name (Last, First, Middle Initial)

A. Shawn W. Slywka

Mailing Address 3406 Springbranch Drive

City

Richardson

State

TX

Zip Code

75082-2437

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Texas Anesthesia Consultant

Occupation

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 20 / 2016

Transaction ID : C9518305

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Jeff Swart

Mailing Address 210 Santa Monica Blvd Apt 308

City

Santa Monica

State

CA

Zip Code

90401-2277

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alson & Bird LLP

Occupation

Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

01 / 20 / 2016

Transaction ID : C9518624

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

C. Allen Wood

Mailing Address 630 21st Avenue NW

City

Hickory

State

NC

Zip Code

28601-1242

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self - Attorney

Occupation

Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

01 / 20 / 2016

Transaction ID : C9518555

Amount of Each Receipt this Period

230.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

Full Name (Last, First, Middle Initial)

A. C.K. Yamasaki

Mailing Address 8651 Foothill Blvd #154

City

Rancho Cucamonga

State

CA

Zip Code

91730-3330

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

01 / 20 / 2016

Transaction ID : C9518581

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

7658.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

Full Name (Last, First, Middle Initial)

A. American Express Establishment Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		07		2016

Mailing Address 12138 Central Ave
886

City Mitchellville State MD Zip Code 20721-1910

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type**Transaction ID : D620182**

Amount of Each Disbursement this Period

662.60

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Human Rights Campaign

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036-3200

Purpose of Disbursement
Draw 1/19/2016 adv from line 24 (web content - staff time)

Candidate Name

Category/
Type**Transaction ID : D622940**

Amount of Each Disbursement this Period

-2180.31

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Human Rights Campaign

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2016

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036-3200

Purpose of Disbursement
Draw 1/21/2016 adv from line 24 (web content - staff time)

Candidate Name

Category/
Type**Transaction ID : D622941**

Amount of Each Disbursement this Period

-9637.76

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-11155.47

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Human Rights Campaign PAC

A. Human Rights Campaign

Mailing Address 1640 Rhode Island Ave NW

City	State	Zip Code
Washington	DC	20036-3200

Purpose of Disbursement	Draw 1/21/2016 adv from line 24 (web content - staff time)
-------------------------	--

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : D622942

Amount of Each Disbursement this Period

-485.30

Full Name (Last, First, Middle Initial)

B. Human Rights Campaign

Mailing Address 1640 Rhode Island Ave NW

City	State	Zip Code
Washington	DC	20036-3200

Purpose of Disbursement	Fund Preimbursement Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Transaction ID : D622990

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

C. Human Rights Campaign

Mailing Address 1640 Rhode Island Ave NW

City	State	Zip Code
Washington	DC	20036-3200

Purpose of Disbursement	Draw 1/24/2016 adv from line 23 (staff time and travel)
-------------------------	---

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : D623112

Amount of Each Disbursement this Period

-636.27

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

23878.43

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Human Rights Campaign PAC

943.73

State: District:

State: District:

State: District:

943.73

13666.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2016

Mailing Address 430 S Capitol St SE

Transaction ID : D622986

City	State	Zip Code
Washington	DC	20003-4024

Amount of Each Disbursement this Period

Purpose of Disbursement
ContributionCategory/
Type

5000.00

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Hillary for America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2016

Mailing Address PO Box 5256

Transaction ID : D623113

Amount of Each Disbursement this Period

City	State	Zip Code
New York	NY	10185

Purpose of Disbursement
Inkind: staff time and related travelCategory/
Type

636.27

Candidate Name

Hillary Rodham Clinton

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input checked="" type="checkbox"/> President

Disbursement For:	2016	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: IA District: 00

Full Name (Last, First, Middle Initial)

C. New Hampshire Democratic Party

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2016

Mailing Address 105 N State St

Transaction ID : D622988

Amount of Each Disbursement this Period

City	State	Zip Code
Concord	NH	03301

Purpose of Disbursement
ContributionCategory/
Type

5000.00

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10636.27

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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

Human Rights Campaign PAC

A. New Hampshire Democratic Party State Candidate Fund

Mailing Address 105 N State St

City	State	Zip Code
Concord	NH	03301

Purpose of Disbursement	Contribution
1. To provide for the maintenance and repair of the building	£100,000
2. To provide for the maintenance and repair of the furniture and fixtures	£50,000
3. To provide for the maintenance and repair of the equipment	£25,000
4. To provide for the maintenance and repair of the vehicles	£15,000
5. To provide for the maintenance and repair of the other assets	£10,000
Total	£200,000

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : D622987

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

1500.00

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 19 OF 27
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Human Rights Campaign PAC		FEC IDENTIFICATION NUMBER ▼ C C00235853	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee Human Rights Campaign		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 19 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 2180.31	
City Washington	State DC	Zip Code 20036	Transaction ID : D621565
Purpose of Expenditure Web and Email Content - Staff Time (nationally disseminated)		Category/Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 19 / 2016
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 43303.37		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Design Army		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 19 / 2016	
Mailing Address 510 H St NE Ste 200		Amount 1500.00	
City Washington	State DC	Zip Code 20002	Transaction ID : D621566
Purpose of Expenditure Web Content - Design (nationally disseminated)		Category/Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 19 / 2016
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 43303.37		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		3680.31	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mr. James M. Rinefied		[Electronically Filed]	
Signature		Date M M M / D D D / Y Y Y Y Y Y 02 / 19 / 2016	

Full Name of Payee Bully Pulpit Interactive LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 19 / 2016	
Mailing Address 1140 Connecticut Ave NW Ste 800		Amount 15000.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D621568 Date of Disbursement or Obligation MM / DD / YYYY 01 / 19 / 2016
Purpose of Expenditure Online Advertising (nationally disseminated)		Category/ Type	
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: 00 State:
Calendar Year-To-Date Per Election for Office Sought		43303.37	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	26625.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

Signature

M M / D D / Y Y Y Y
02 19 2016

Full Name of Payee Human Rights Campaign		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 9637.76	
City Washington	State DC	Zip Code 20036	Transaction ID : D621717
Purpose of Expenditure Web Content - Staff Time (nationally disseminated)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 21 / 2016
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: 00 State:
Calendar Year-To-Date Per Election for Office Sought		43303.37	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	12512.76
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 22 OF 27
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Human Rights Campaign PAC		FEC IDENTIFICATION NUMBER ▼ C C00235853	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee Human Rights Campaign		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 485.30	
City Washington	State DC	Zip Code 20036	Transaction ID : D621720
Purpose of Expenditure Web Content - Staff Time (nationally disseminated)		Category/Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 43303.37		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Stones' Phones		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 23 / 2016	
Mailing Address 41-750 Rancho Las Palmas Dr Ste E-		Amount 16524.95	
City Rancho Mirage	State CA	Zip Code 92270	Transaction ID : D622364
Purpose of Expenditure Telephone Calls		Category/Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 23 / 2016
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 47589.79		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		17010.25	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mr. James M. Rinefied		[Electronically Filed]	
Signature		Date M M M / D D D / Y Y Y Y Y Y 02 / 19 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 23 OF 27
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Human Rights Campaign PAC			FEC IDENTIFICATION NUMBER ▼ C C00235853		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			MM / DD / YYYY		
Full Name of Payee API			Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 24 / 2016		
Mailing Address 4471 Nicole Dr			Amount 3110.20		
City Lanham		State MD	Zip Code 20706		Transaction ID : D622366
Purpose of Expenditure T-Shirts/Stickers/Buttons		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 24 / 2016		
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought		47589.79	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee API			Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 24 / 2016		
Mailing Address 4471 Nicole Dr			Amount 3010.20		
City Lanham		State MD	Zip Code 20706		Transaction ID : D622367
Purpose of Expenditure T-Shirts/Stickers/Buttons		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 24 / 2016		
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought		47589.79	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			6120.40		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Mr. James M. Rinefied		[Electronically Filed]		Date MM / DD / YYYY 02 / 19 / 2016	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 24 OF 27
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Human Rights Campaign PAC			FEC IDENTIFICATION NUMBER ▼ C C00235853	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y				
Full Name of Payee The Pivot Group			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 27 / 2016	
Mailing Address 1720 I St NW			Amount 18336.00	
City Washington	State DC	Zip Code 20006	Transaction ID : D622392	
Purpose of Expenditure Mailing		Category/Type 	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 27 / 2016	
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought 47589.79		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee API			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 28 / 2016	
Mailing Address 4471 Nicole Dr			Amount 3842.19	
City Lanham	State MD	Zip Code 20706	Transaction ID : D622376	
Purpose of Expenditure T-Shirts/Stickers/Buttons		Category/Type 	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 28 / 2016	
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 16700.39		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			22178.19	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Mr. James M. Rinefied		[Electronically Filed]		Date M M M / D D D / Y Y Y Y Y Y 02 / 19 / 2016
Signature				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 25 OF 27
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Human Rights Campaign PAC			FEC IDENTIFICATION NUMBER ▼ C C00235853	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY				
Full Name of Payee API			Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 28 / 2016	
Mailing Address 4471 Nicole Dr			Amount 2108.14	
City Lanham	State MD	Zip Code 20706	Transaction ID : D623121	
Purpose of Expenditure T-Shirts/Stickers/Buttons		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYY 01 / 28 / 2016	
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		2108.14	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ 	
Full Name of Payee API			Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 28 / 2016	
Mailing Address 4471 Nicole Dr			Amount 1234.24	
City Lanham	State MD	Zip Code 20706	Transaction ID : D623122	
Purpose of Expenditure T-Shirts/Stickers/Buttons		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYY 01 / 28 / 2016	
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought		1234.24	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ 	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			3342.38	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			 	
(c) TOTAL Independent Expenditures..... ▶			 	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Mr. James M. Rinefied		[Electronically Filed]	Date MM / DD / YYYY 02 / 19 / 2016	
Signature				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 26 OF 27
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Human Rights Campaign PAC			FEC IDENTIFICATION NUMBER ▼ C C00235853	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			MM / DD / YYYY	
Full Name of Payee API		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 29 / 2016		
Mailing Address 4471 Nicole Dr		Amount 62.44		
City Lanham	State MD	Zip Code 20706	Transaction ID : D622419	
Purpose of Expenditure T-Shirts		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 29 / 2016	
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		47589.79	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee API		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 29 / 2016		
Mailing Address 4471 Nicole Dr		Amount 481.25		
City Lanham	State MD	Zip Code 20706	Transaction ID : D622420	
Purpose of Expenditure Stickers		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 29 / 2016	
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		47589.79	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		543.69		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Mr. James M. Rinefied		[Electronically Filed]		Date
Signature				MM / DD / YYYY 02 / 19 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 27 OF 27
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Human Rights Campaign PAC			FEC IDENTIFICATION NUMBER ▼ C C00235853		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Stones' Phones			Date of Public Distribution/Dissemination 01 / 29 / 2016		
Mailing Address 41-750 Rancho Las Palmas Dr Ste E-			Amount 6064.75		
City Rancho Mirage	State CA	Zip Code 92270	Transaction ID : D622421		
Purpose of Expenditure Telephone Calls		Category/ Type 	Date of Disbursement or Obligation 01 / 29 / 2016		
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>		
Calendar Year-To-Date Per Election for Office Sought		47589.79	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee The Pivot Group			Date of Public Distribution/Dissemination 01 / 29 / 2016		
Mailing Address 1720 I St NW			Amount 12858.20		
City Washington	State DC	Zip Code 20006	Transaction ID : D622647		
Purpose of Expenditure Mailing		Category/ Type 	Date of Disbursement or Obligation 01 / 29 / 2016		
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought		16700.39	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			18922.95		
(b) SUBTOTAL of Unitemized Independent Expenditures▶					
(c) TOTAL Independent Expenditures.....▶			110935.93		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Mr. James M. Rinefied		[Electronically Filed]	Date 02 / 19 / 2016		
Signature					